MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
BUREAU OF ENVIRONMENTAL HEALTH SERVICES
**FOOD ESTABLISHMENT INSPECTION REPORT**

| TIME IN 9:30 | TIME OUT 11:00 |
|---|---|
| DATE 12-09-21 | PAGE 1 of 2 |

BASED ON AN INSPECTION THIS DAY, THE ITEMS NOTED BELOW IDENTIFY NONCOMPLIANCE IN OPERATIONS OR FACILITIES WHICH MUST BE CORRECTED BY THE NEXT ROUTINE INSPECTION, OR SUCH SHORTER PERIOD OF TIME AS MAY BE SPECIFIED IN WRITING BY THE REGULATORY AUTHORITY. FAILURE TO COMPLY WITH ANY TIME LIMITS FOR CORRECTIONS SPECIFIED IN THIS NOTICE MAY RESULT IN CESSATION OF YOUR FOOD OPERATIONS.

| ESTABLISHMENT NAME: | OWNER: | PERSON IN CHARGE: |
|---|---|---|
| Farmington Senior Center | City of Farmington | Ursula Warren |

| ADDRESS: | ESTABLISHMENT NUMBER: | COUNTY: |
|---|---|---|
| 607 Wallace Rd. | 0825 | 187 |

| CITY/ZIP: | PHONE: | FAX: | P.H. PRIORITY : |
|---|---|---|---|
| Farmington 63640 | 573-431-1947 | | ■ H ☐ M ☐ L |

ESTABLISHMENT TYPE
☐ BAKERY ☐ C. STORE ☐ CATERER ☐ DELI ☐ GROCERY STORE ☐ INSTITUTION ☐ MOBILE VENDORS
☐ RESTAURANT ☐ SCHOOL ■ SENIOR CENTER ☐ SUMMER F.P. ☐ TAVERN ☐ TEMP.FOOD

PURPOSE
☐ Pre-opening ■ Routine ☐ Follow-up ☐ Complaint ☐ Other _____

| FROZEN DESSERT | SEWAGE DISPOSAL | WATER SUPPLY |
|---|---|---|
| ☐ Approved ☐ Disapproved ■ Not Applicable | ■ PUBLIC | ■ COMMUNITY ☐ NON-COMMUNITY ☐ PRIVATE |
| License No. _____ | ☐ PRIVATE | Date Sampled _____ Results _____ |

## RISK FACTORS AND INTERVENTIONS

**Risk factors** are food preparation practices and employee behaviors most commonly reported to the Centers for Disease Control and Prevention as contributing factors in foodborne illness outbreaks. **Public health interventions** are control measures to prevent foodborne illness or injury.

| Compliance | Demonstration of Knowledge | COS | R |
|---|---|---|---|
| ✓IN OUT | Person in charge present, demonstrates knowledge, and performs duties | | |
| | **Employee Health** | | |
| ✓IN OUT | Management awareness; policy present | | |
| ✓IN OUT | Proper use of reporting, restriction and exclusion | | |
| | **Good Hygienic Practices** | | |
| ✓IN OUT N/O | Proper eating, tasting, drinking or tobacco use | | |
| ✓IN OUT N/O | No discharge from eyes, nose and mouth | | |
| | **Preventing Contamination by Hands** | | |
| ✓IN OUT N/O | Hands clean and properly washed | | |
| ✓IN OUT N/O | No bare hand contact with ready-to-eat foods or approved alternate method properly followed | | |
| ✓IN OUT | Adequate handwashing facilities supplied & accessible | | |
| | **Approved Source** | | |
| ✓IN OUT | Food obtained from approved source | | |
| IN OUT ✓N/O N/A | Food received at proper temperature | | |
| ✓IN OUT | Food in good condition, safe and unadulterated | | |
| IN OUT N/O ✓N/A | Required records available: shellstock tags, parasite destruction | | |
| | **Protection from Contamination** | | |
| ✓IN OUT N/A | Food separated and protected | | |
| IN ✓OUT N/A | Food-contact surfaces cleaned & sanitized | | |
| IN OUT ✓N/O | Proper disposition of returned, previously served, reconditioned, and unsafe food | | |

| Compliance | Potentially Hazardous Foods | COS | R |
|---|---|---|---|
| IN OUT ✓N/O N/A | Proper cooking, time and temperature | | |
| IN OUT ✓N/O N/A | Proper reheating procedures for hot holding | | |
| IN OUT ✓N/O N/A | Proper cooling time and temperatures | | |
| ✓IN OUT N/O N/A | Proper hot holding temperatures | | |
| ✓IN OUT N/A | Proper cold holding temperatures | | |
| ✓IN OUT N/O N/A | Proper date marking and disposition | | |
| IN OUT ✓N/O N/A | Time as a public health control (procedures / records) | | |
| | **Consumer Advisory** | | |
| IN OUT ✓N/A | Consumer advisory provided for raw or undercooked food | | |
| | **Highly Susceptible Populations** | | |
| IN OUT N/O ✓N/A | Pasteurized foods used, prohibited foods not offered | | |
| | **Chemical** | | |
| IN OUT ✓N/A | Food additives: approved and properly used | | |
| ✓IN OUT | Toxic substances properly identified, stored and used | | |
| | **Conformance with Approved Procedures** | | |
| IN OUT ✓N/A | Compliance with approved Specialized Process and HACCP plan | | |

The letter to the left of each item indicates that item's status at the time of the inspection.
IN = in compliance OUT = not in compliance
N/A = not applicable N/O = not observed
COS=Corrected On Site R=Repeat Item

## GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the introduction of pathogens, chemicals, and physical objects into foods.

| IN | OUT | Safe Food and Water | COS | R |
|---|---|---|---|---|
| ✓ | | Pasteurized eggs used where required | | |
| ✓ | | Water and ice from approved source | | |
| | | **Food Temperature Control** | | |
| ✓ | | Adequate equipment for temperature control | | |
| ✓ | | Approved thawing methods used | | |
| ✓ | | Thermometers provided and accurate | | |
| | | **Food Identification** | | |
| ✓ | | Food properly labeled; original container | | |
| | | **Prevention of Food Contamination** | | |
| ✓ | | Insects, rodents, and animals not present | | |
| ✓ | | Contamination prevented during food preparation, storage and display | | |
| ✓ | | Personal cleanliness: clean outer clothing, hair restraint, fingernails and jewelry | | |
| ✓ | | Wiping cloths: properly used and stored | | |
| ✓ | | Fruits and vegetables washed before use | | |

| IN | OUT | Proper Use of Utensils | COS | R |
|---|---|---|---|---|
| ✓ | | In-use utensils: properly stored | | |
| ✓ | | Utensils, equipment and linens: properly stored, dried, handled | | |
| ✓ | | Single-use/single-service articles: properly stored, used | | |
| ✓ | | Gloves used properly | | |
| | | **Utensils, Equipment and Vending** | | |
| ✓ | | Food and nonfood-contact surfaces cleanable, properly designed, constructed, and used | | |
| | ✓ | Warewashing facilities: installed, maintained, used; test strips used | | |
| | ✓ | Nonfood-contact surfaces clean | | |
| | | **Physical Facilities** | | |
| ✓ | | Hot and cold water available; adequate pressure | | |
| ✓ | | Plumbing installed; proper backflow devices | | |
| ✓ | | Sewage and wastewater properly disposed | | |
| ✓ | | Toilet facilities: properly constructed, supplied, cleaned | | |
| | ✓ | Garbage/refuse properly disposed; facilities maintained | | |
| | ✓ | Physical facilities installed, maintained, and clean | | |

| Person in Charge /Title: | | Date: |
|---|---|---|
| Ursula Warren | | 12-09-21 |

| Inspector: | Telephone No. | EPHS No. | Follow-up: ☐ Yes ■ No |
|---|---|---|---|
| Kaleb Erwin | (573)431-1947 | | Follow-up Date: |

MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES
BUREAU OF ENVIRONMENTAL HEALTH SERVICES
**FOOD ESTABLISHMENT INSPECTION REPORT**



| ESTABLISHMENT NAME | ADDRESS | CITY /ZIP |
|---|---|---|
| Farmington Senior Center | 607 Wallace Rd. | Farmington 63640 |

| FOOD PRODUCT/LOCATION | TEMP. in ° F | FOOD PRODUCT/ LOCATION | TEMP. in ° F |
|---|---|---|---|
| Walk In Cooler Chicken | 30 | | |
| Walk In Cooler Mixed Veg. | 40-39 | | |
| Hot Bar Gravey | 189 | | |
| Hot Bar Mixed Veg. | 175 | | |
| True Cooler | 35 | | |

| Code Reference | **PRIORITY ITEMS** Priority items contribute directly to the elimination, prevention or reduction to an acceptable level, hazards associated with foodborne illness or injury. **These items MUST RECEIVE IMMEDIATE ACTION within 72 hours or as stated.** | Correct by (date) | Initial |
|---|---|---|---|
| 4-601.11A | The inside of the ice machine on the back wall of the kitchen was observed with hard water build up. Food contact surfaces of equipment shall be clean. | | |

| Code Reference | **CORE ITEMS** Core items relate to general sanitation, operational controls, facilities or structures, equipment design, general maintenance or sanitation standard operating procedures (SSOPs). **These items are to be corrected by the next regular inspection or as stated.** | Correct by (date) | Initial |
|---|---|---|---|
| 4-601.11C | The outside surface of the oven in kitchen area was observed with minor food debris. Ceiling tiles around ceiling vents were observed dirty and a ceiling tile in dry storage was observed with a water stain. Non food contact surfaces shall be cleaned as often as necessary to keep them clean. | | |
| 6-501.12 | Ceiling vents were observed over food prep areas with a minor accumulation of dust and rust observed some of the vent covers. Intake and exhaust ventilation shall be cleaned and filters changed as often a necessary. | | |
| 4-302.14 | Test strips for test the sanitizing temperature for the dish washing machine were not provided. Test strips shall be provide to check the temperature of a dish washing machine using temperature for the sanitizing step. | | |
| 5-501.17 | The outside trash receptacle was observed with its lid open. Outside trash receptacles shall have tight fitting lid to prevent the entry of pest. | | |

EDUCATION PROVIDED OR COMMENTS

| Person in Charge /Title: | Ursula Warren | Date: 12-09-21 | |
|---|---|---|---|
| Inspector: | Kaleb Erwin | Telephone No. (573)431-1947 / EPHS No. | Follow-up: ☐Yes ☒No<br>Follow-up Date: |